

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		9/30/99
O.I.P.E. CLASSIFIER	MTN	59	10-6-99
FORMALITY REVIEW	92WVB	70976	10-13-99
	92WVB	70971	12-21-99

INDEX OF CLAIMS

✓ Rejected
 Allowed
 (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	5/21
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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